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APPLICANTS

David A. Hammond, Tinton Falls, NJ;

** CONTINUING DATA ***** Yes, *dr*
 This application is a CON of 09/596,157 06/16/2000 ABN
 which is a CIP of 09/326,837 06/07/1999 ABN

** FOREIGN APPLICATIONS ***** No, *dr*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 10/18/2001

** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Dr. M. M.</i> Examiner's Signature Initials	STATE OR COUNTRY NJ	SHEETS DRAWING 10	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 3
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TITLE

Emergency relief system

FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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